		7
his form is not	TIONS, SEE BACK OF FORM applicable to statutory political committees.  Dissolution	FORM (Rev. 02/96)  DR-3  NOTICE OF DISSOLUTION
COI	ery Notice of Dissolution shall be accompanied by a mpleted Disclosure Report Form current to the date of sclution.	For Office Use Only  Comm. # 17150 Indexed Audited Computer Certified Date of Dissolution
Official Name of Committee		
The Charles	20 TOTA COUNTY ATTORNEY	JACKSON
JAN ?	Street  3000 DIVISION  City, State, Zip Code	
	BURLINGTON I DWA 5260	O / Telephone
,	Code _(319),753-543	

	<del></del>		
Effective date of dissolution:			
1-19-03	, 20		
Mit of Muca. IT			
Signature of Treasurer			
1-11-03	•		
Date Signed			

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

Signature of Candidate - Required for Candidate's Committee

01-13-03

Date signed

## WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached.